

In Search of Peace and Harmony

The Legacy of Psychological Trauma of The Vietnam War For Native Hawaiian and American of Japanese Ancestry Military Personnel



Matsunaga Vietnam Veterans Project

A Guide for Veterans and Families

Department of Veterans Affairs
The National Center for Post-Traumatic Stress Disorder
Office of Minority Affairs
Readjustment Counseling Service
Office of Strategic Mental Health Healthcare
Veterans Benefits Administration

The design of this logo was created to represent the contributions of American Indian veterans (the eagle feathers), American of Japanese Ancestry veterans (the Japanese character meaning "to overcome"), and Native Hawaiian veterans (the hibiscus flower). The fire burning below a representation of the map of Vietnam reflects the trauma that many of these veterans experienced and the healing they seek.

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Military personnel of many ethnocultural backgrounds served with distinction in the Vietnam War. The 1988 National Vietnam Veterans Readjustment Study (NVVRS) demonstrated that Black and Hispanic veterans who served in Vietnam experienced significantly greater readjustment problems and higher levels of post-traumatic stress disorder (PTSD) than White veterans. To extend the study findings to other minority veterans, the late Senator from Hawaii, Spark Matsunaga, initiated a major project to assess the readjustment experience of American Indian, Japanese American, and Native Hawaiian veterans of the Vietnam war. This resulted in Public Law 101-507, which directed the VA's National Center for PTSD to conduct what became known as the Matsunaga Vietnam Veterans Project.

The Matsunaga Project involved two parallel studies. The **American Indian Vietnam Veterans Project** surveyed a sample of Vietnam in-country veterans residing on or near two large tribal reservations, one in the Southwest and the other in the Northern Plains, with sufficient numbers of Vietnam military veterans to draw scientifically and culturally sound conclusions about war and readjustment experiences.

The **Hawaii Vietnam Veterans Project** surveyed two samples, one of Native Hawaiians (the indigenous peoples of the Hawaiian Islands, who comprise about 22% of the permanent population) and another of Americans of Japanese Ancestry (the descendants of Japanese immigrants who comprise about 24% of the permanent population).

Matsunaga study participants were interviewed face-to-face for several hours with culturally-sensitive questions about their prewar and war experiences, post-traumatic stress disorder (PTSD) and other health problems, their personal, family, work, and education readjustment experiences, and their use of VA health care services. Only men participated because, despite their key contributions to the military, there are few women Vietnam veterans in these survey populations.

Although many American Indian veterans from other tribes and areas of the United States served in Vietnam, in a single study it is not possible to characterize every possible American Indian tribe or veteran. The many American Indian experiences and cultures *all* require recognition and respect. The similarities and differences revealed by surveying hundreds of Vietnam veterans from each of two large and different tribes bring to life the richness and diversity of the American Indian experience before, during, and after the Vietnam War.

The Matsunaga Study's **key finding** is that exposure to war zone stress and other military danger places veterans at risk for PTSD several decades after military service. Native Hawaiian and American Indian Vietnam in-country veterans had relatively high levels of exposure to war zone stress, and of later PTSD. Caucasian and Japanese American veterans tended to have somewhat lower levels of exposure to war zone stress, and later PTSD.

The unique cultural traditions, society, and family experiences of each different ethnocultural group played an important role in the veteran's homecoming and readjustment after Vietnam, but do not appear to either cause or prevent PTSD.

Native Hawaiian Veterans' Experiences Before, During and After the Vietnam War

"I grew up close to my family and the land, protected from the outside world. I enlisted in the Army Reserves when I was working and going to college part time, and the military discipline was good for me. Everything fell apart in Vietnam; I felt cut off from my home and family, in a bloody nightmare. I re-upped for a second tour because I wanted to die in Vietnam. I came home, went back to work, got married—but never escaped the memories and dreams of death. I still feel dead inside much of the time, although I'm beginning to feel a part of my family as I tell my story in counseling and to my kupunas."

Before Military Service

Native Hawaiian veterans generally described a positive relationship with their parents while growing up and valued the support of their extended families and communities. Some Native Hawaiians, however, did encounter physical abuse and family substance abuse while growing up. They learned to trust and honor traditional values, but to distrust the government and mainstream culture. These men tended to attend and complete school, to have friends, and to be involved in organized activities such as athletics.

Entering Military Service

More than half of the Native Hawaiian veterans volunteered for duty in Vietnam, to obtain opportunities for education, jobs and travel, and they were proud to protect their home and country. Many re-enlisted and served more than one tour, and many attained the rank of non-commissioned officer. They tended to value the training and discipline of military service, but often felt isolated from their fellow soldiers. Many faced close and personal racial prejudice and discrimination for the first time, and felt disillusioned and angry when they encountered racial hostility or disrespect.

The Trauma of Military Service in War

More than one in two Native Hawaiian veterans experienced war-related trauma in Vietnam. The war traumas included being under fire on helicopters, cargo and reconnaissance aircraft, patrol boats, navy ships, or cargo and transport trucks, being on frequent or prolonged combat missions in enemy territory (including Cambodia and Laos), encountering ambushes and firefights, being attacked by sappers, snipers, artillery, or rockets, witnessing death and terrible harm to their own or others' bodies, and very hazardous duty such as walking point, radio operator, medic, scout, tunnel rat, perimeter sentry, long range patrol, or door gunner. Native Hawaiians and American Indians were more likely than any other Survey group to received combat service medals in recognition of their hazardous combat duty.

The Long Journey Home

Upon returning home after one or more tours in Vietnam many Native Hawaiian veterans struggled with extremely severe problems that neither they nor their families, friends, or communities knew how to understand or cope with:

- ❖ Depression (such as hopelessness, loss of all interests, or suicidal impulses)
- ❖ Shame (such as feeling embarrassed, exposed, violated, or like a misfit)
- ❖ Guilt (such as feeling others should have lived and he should have died, or feeling that he failed or made mistakes that had terrible consequences)
- ❖ Isolation and emotional emptiness (such as being very remote and withdrawn)
- ❖ Alienation (such as feeling that no one understands or that everyone makes too much fuss about unimportant things and too little about big problems)
- ❖ Unable to relax (such as restless, sleepless, silently tense or on-edge)
- ❖ Addiction (such as compulsive overuse of alcohol)

Japanese American Veterans' Experiences Before, During and After the Vietnam War

"I was very dutiful and hardworking growing up, and quietly did well in school. I respected elders in my family and community, and sought to bring honor to them without attracting attention to myself. I joined ROTC in college and was sent to Vietnam as a raw second lieutenant in the Air Force. As an officer, I didn't see as much combat as many others. I don't think the men really trusted me because I looked too much like a Vietnamese to them, but I didn't harass them and they didn't hassle me. Since Vietnam I've done well in my profession. I'm married and raising my children with the same values I learned. I have nightmares of the war that can give me a headache and high blood pressure for several days; sometimes I'm Charlie and my own men are hunting and killing me."

Before Military Service

Japanese American veterans described growing up in a close knit and supportive extended family community, learning to put self-interest second to obedience and respect for authority. They sought success in the mainstream by quietly achieving in school and college, but their loyalty was to the extended family.

Entering Military Service

Japanese American veterans often enlisted in college and became officers in order to advance their careers. They were proud to protect their home and country, valued military training and discipline, but felt isolated. Many faced close and personal racial prejudice and discrimination for the first time, as a result of their Asian appearance, and felt not only disillusioned but also fearful of being physically harmed ("fragged").

Trauma of Military Service in War

More than one in three Japanese Americans experienced war trauma in Vietnam. These included being under enemy fire or ambushed, being attacked by sappers, snipers, artillery, or rockets, witnessing death and terrible harm to their own or others' bodies, and extreme conflict due to having to kill or be killed by Asians who other American soldiers often dehumanized.

The Long Journey Home

Although American of Japanese Ancestry veterans often report feeling happy in their family lives and being successful in their education and careers, some have suffered silently since returning from Vietnam:

- ❖ Fears (such as of closed spaces, crowds, unfamiliar places, or sudden attack)
- ❖ Anxiety (such as restlessness, obsessive worries, compulsive rituals)
- ❖ Panic (such as a terror of losing control, suffocating, or going crazy)
- ❖ Depression (such as hopelessness, loss of all interests, or suicidal impulses)
- ❖ Irritability (such as feeling constantly annoyed, on edge, and critical)
- ❖ Shame (such as feeling embarrassed, exposed, violated, or like a misfit)
- ❖ Guilt (such as feeling others should have lived and he should have died, or feeling that he failed or made mistakes that had terrible consequences)
- ❖ Isolation and emotional emptiness (such as being very remote and withdrawn)
- ❖ Alienation (such as feeling that no one understands what's really important in life)
- ❖ Over controlling (such as being very demanding or controlling about decisions)

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The Hidden Enemy: Post-traumatic Stress Disorder (PTSD)

What neither these veterans nor their families (nor even many VA counselors and doctors) knew was that many of these veterans were suffering from PTSD. The symptoms of PTSD include:

- ❖ Unwanted distressing memories or a feeling of reliving (flashbacks) traumatic Vietnam experiences
- ❖ Nightmares and difficulty falling or staying asleep restfully
- ❖ Bodily stress and tension, especially when reminded of traumatic Vietnam experiences
- ❖ Loss of interest in activities and difficulty in concentrating on activities or projects
- ❖ Detachment or withdrawal from emotional involvement in relationships
- ❖ Difficulty feeling or expressing emotions other than irritability or frustration
- ❖ Feeling like there is no future or their lives will be cut short by an untimely death
- ❖ Feeling jumpy, on-edge, and easily startled
- ❖ Feeling constantly unsafe and unable to let down their guard (hyper-vigilant)

One in three Native Hawaiian and **one in twenty** Japanese American in-country Vietnam veterans have full or partial PTSD currently. More than **one in two** Native Hawaiian and one in seven Japanese American in-country veterans have had full or partial PTSD sometime since Vietnam. Native Hawaiians' PTSD prevalence is very high, while the Japanese Americans' is quite low. However, veterans who experienced war trauma, regardless of cultural or racial background, are at risk for PTSD.

PTSD's Effect on Family and Friendships

Other people—spouses, children, family members, friends, or co-workers—often are more aware of the veteran's emotional distress than he is himself. Decades of haunting memories and overwhelming feelings leave the veteran suffering from PTSD feeling demoralized and alone. He may believe that his family or community need him to bear the burden of pain, fear, anger, shame, and guilt silently. He may believe PTSD symptoms are a sign of weakness and failure due to a lack of will power, self-discipline, or self-control—a shameful personal flaw that must be hidden or corrected by behaving more correctly. PTSD may be an extreme spiritual crisis. When family or friends see signs of the veteran's inner turmoil, they don't know why it's happening and often blame themselves: *"I thought I was doing something wrong, but I never knew what!"* Nor do they know how to help: *"I gave up trying to break through his emotional walls."*

The family's view of PTSD may include:

- ❖ *"He tries so hard to be perfect that he can't admit when he makes a mistake or needs help."*
- ❖ *"He tries to enjoy being with us, but his heart's not in it and his mind's always somewhere else."*
- ❖ *"For him, every problem's a disaster, and we're slow, stupid, and never careful enough."*
- ❖ *"It's his duty to behave honorably, so I don't want to shame him by showing I know he is suffering."*

PTSD and Physical Health

PTSD symptoms such as restlessness, tension, irritability, anxiety, and poor sleep often are viewed by veterans and healthcare providers as signs of physical illnesses such as high blood pressure, stomach or bowel conditions, or pain. PTSD affects the body, and can accompany or worsen physical illnesses.

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Because many Native Hawaiian and Japanese American veterans prefer medical to psychiatric clinics, doctors and nurses can help veterans learn how PTSD affects the body, and how to use good health practices to manage stress (such as relaxation, good nutrition, regular exercise, not smoking, and limiting use of alcohol). Traditional healing practices used in the Native Hawaiian or Japanese American cultures also can help in the care of PTSD.

Steps Toward Recovery for the Veteran and Family

Recovery from PTSD involves several steps by which a veteran and family can begin to recover from the emotional wounds and take steps toward regaining a healthy, happy, and satisfying life together:

- ❖ Talk frankly and privately to a trusted healer or counselor who is sensitive to the understandable feelings of guilt or embarrassment, about emotional and physical stress.
- ❖ Learn about psychological stress and trauma, for example by reading or in a class.
- ❖ Books often recommended by Veterans and Families include:

I Can't Get Over It:

A Handbook for Trauma Survivors
by Aphrodite Matsakis,
New Harbinger Publications, 1992

Recovering from War,

by Patience Mason.
Viking Penguin, 1990.

- ❖ Books describing Native Hawaiian and Japanese American culture and mental health include:

People and Cultures of Hawaii: A Psychocultural Profile

by McDermott, Tseng & Maretzki
University of Hawaii Press, 1980

Resiliency in Ethnic Minority Families: Volume 1: Native and Immigrant American Families

McCubbin, Thompson, Thompson & Fromer, (Eds.)
University of Wisconsin System, 1995

- ❖ Articles describing Native Hawaiian and Japanese American veterans' post-Vietnam experience include:

Ethnic identity and Vietnam: A Japanese-American Vietnam veteran with PTSD

by Hamada, Chemlob, Sautner, & Sato
Hawaii Medical Journal 47: 100-106, 109: 1988

The wartime and postwar experiences of Asian-Pacific American Vietnam veterans

by Matsuoka, Hamada, et al.
The Journal of Applied Social Sciences 16: 23-26:1992

Race-related PTSD: The Asian American Vietnam veteran

by C. Loo
Journal of Traumatic Stress 7: 637-656: 1994

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Guidelines for productive and helpful discussion of stress and trauma:

- A. Each person has a different point of view that should be stated honestly and respected, not criticized or rejected
 - B. Stress and trauma affect **everyone** in a family or close relationship, so everyone needs to both help and be helped
 - C. Listen carefully to learn, provide moral support, and find solutions—rather than blaming or finding fault
 - D. Tell what's most important to you, not what you think you are "supposed to say" to be polite or to attract sympathy
 - E. Take each person's feedback seriously—we all see our own stress reactions less clearly than other people see them
 - F. If talking seems to make things worse, or just doesn't help, find a helper such as a counselor, elder, or a spiritual advisor
- ❖ 3. Begin experimenting with small changes in your activities and lifestyle that give you a feeling of greater satisfaction, enjoyment, relaxation, and accomplishment in your self and your relationships. Every small step toward feeling more in control of your own destiny brings emotional renewal and genuine intimacy in relationships.
 - ❖ 4. Become involved with traditional teachers and healing ceremonies in your community. Rediscover traditions that have helped countless warriors return home, heal the wounds of war, and become a vital member of their families and community.
 - ❖ 5. Seek medical or mental health help from your nearest Department of Veterans Affairs Vet Center, Medical Center, Outpatient Clinic, or Veteran Benefits Office.

Help is available for Native Hawaiian and American of Japanese Ancestry Vietnam veterans suffering from PTSD

With the publication of the Matsunaga Study's findings in June 1997, medical and mental health clinicians at all Department of Veterans Affairs *Vet Centers, Medical Centers, and Outpatient Clinics* are more aware than ever that American Indian American veterans who experienced trauma in Vietnam may need help with PTSD. Vet Center counselors often provide *outreach services* right in the community (as well as to prisons and schools) to help veterans who are reluctant or unable to come to a VA hospital. VA clinicians and counselors know how to privately and sensitively help veterans to recover from health or family problems that are the hidden result of PTSD.

If you have never sought or received care from a DVA hospital or clinic, here are practical steps any veteran can take today to enroll in DVA medical care:

1. Call the VA Benefits Office near you and ask for an initial appointment to discuss how to file an application for healthcare eligibility or financial benefits from VA. This toll-free number can also help you locate the other services listed below:

1-800-827-1000

2. Call the Vet Center nearest you and ask for an intake appointment to discuss with a counselor any health, stress or mental health concerns that you suspect are due to Vietnam military service—or to service in the military in any other warzone before or since Vietnam. Consult your local telephone directory under United States Government, Veterans Affairs, or call:

1-202-273-8967

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3. Call a VA medical center or outpatient clinic near you and ask for an intake appointment for a thorough health check.
4. If you would like more information on programs and services for veterans, consult the Department of Veterans Affairs home page on the Internet. Visit your local library if you do not have access to the Internet at home. The Internet address is:

<http://www.va.gov>

5. Make an appointment to speak with a Service Officer from a Veterans Service Organization—such as:

AmVets

American Legion

Disabled American Veterans

Paralyzed Veterans of America

Military Order of the Purple Heart

Veterans of Foreign Wars

For assistance in establishing eligibility for VA medical care or help in receiving VA financial benefits.

Every VA medical center and clinic has a PTSD specialist who is familiar with readjustment problems that can be caused by war trauma, and who can provide you with a thorough evaluation and recommendations for treatment. PTSD treatment may involve:

- ❖ Educational classes for veterans and for families about trauma, PTSD, and recovery
- ❖ Educational and support groups for dealing with anger, depression, anxiety, and stress
- ❖ Special supportive therapy and socialization groups for Native Hawaiian and American Japanese Ancestry veterans
- ❖ Special therapy groups for veterans with PTSD from war or other military trauma
- ❖ One-to-one therapy and supportive guidance
- ❖ Evaluation to determine if medication would be beneficial and acceptable to the veteran
- ❖ Counseling and education to assist in coping with the stress of chronic medical problems
- ❖ Evaluation and treatment for alcohol abuse or dependence